ARIZONA DEPARTMENT OF HEALTH SERVICES DIVISION OF BEHAVIORAL HEALTH SERVICES DIVISION DOCUMENT REVISION NOTICE

The Arizona Department of Health Services/Division of Behavioral Health Services has revised the below referenced document(s), indicated by **BOLD** print and the symbol **[X]**. The attached matrix includes a detailed description of the changes impacting the selected document(s). The revised document(s) will be posted to the ADHS/DBHS website on or around the effective date. Please direct any questions regarding this Division document revision notice to Margaret Russell at (602) 364-4658 or via electronic mail at russelm@azdhs.gov.

| DIVISION | ADHS/DBHS PROVIDER | ADHS/DBHS POLICY AND | ADHS/DBHS PROGRAM | ADHS/DBHS COVERED |
|--------------|--------------------------|----------------------|-----------------------|---------------------|
| DOCUMENT | MANUAL | PROCEDURES MANUAL | SUPPORT PROCEDURES | BEHAVIORAL HEALTH |
| | | | MANUAL | SERVICES GUIDE |
| REVISION [X] | [X] | | | |
| DIVISION | CLIENT INFORMATION | OFFICE OF GRIEVANCE | ADHS ACCOUNTING AND | FINANCIAL REPORTING |
| DOCUMENT | SYSTEM (CIS) FILE LAYOUT | AND APPEALS DATABASE | AUDITING PROCEDURES | GUIDE FOR REGIONAL |
| | AND SPECIFICATIONS | MANUAL | MANUAL | BEHAVIORAL HEALTH |
| | MANUAL | | | AUTHORITIES |
| REVISION [X] | | | | |
| DIVISION | ADHS/DBHS QUALITY | ADHS/DBHS PREVENTION | AHCCCS MEDICAL POLICY | ADHS/DBHS STRATEGIC |
| DOCUMENT | MANAGEMENT/UTILIZATION | FRAMEWORK FOR | MANUAL-CHAPTERS 900 | PLAN |
| | MANAGEMENT PLAN | BEHAVIORAL HEALTH | AND 1000 | |
| REVISION [X] | | | | |
| DIVISION | ADHS/DBHS CULTURAL | ADHS/DBHS CLINICAL | TITLE XIX CHILDREN'S | |
| DOCUMENT | COMPETENCE PLAN | GUIDANCE DOCUMENTS | BEHAVIORAL HEALTH | |
| | <u> </u> | | ANNUAL ACTION PLAN | |
| REVISION [X] | | | | |

| ADHS/DBHS PROVIDER MANUAL SECTION 3.4, Co-Payments | | | | | |
|---|---|---|---------------------------------|--|--|
| Policy # | TITLE | DESCRIPTION OF CHANGE | Last Revision Effective Date | | |
| PM 3.4 Co-Payments | 3.4 References | Updated references | May 1, 2008 | | |
| PM 3.4 Co-Payments | 3.4.4 Did You Know | Added information regarding the Social Security Disability Insurance Temporary Medical Coverage (SSDI-TMC) program | May 1, 2008 | | |
| PM 3.4 Co-Payments | 3.4.6-A Co-payments for Non-TXIX/XXI eligible persons | Added "When Title XIX/XXI eligibility is terminated" as another instance in which a copayment amount is determined, in the table. | May 1, 2008 | | |
| PM 3.4 Co-Payments | 3.4.6-B Co-payments for Title XIX/XXI eligible persons | Added: "from a Title XIX/XXI eligible person" to the first sentence in the second paragraph. | May 1, 2008 | | |
| ADHS/DBH | S PROVIDER MA | ANUAL FORM 3.4.1 Non-TXIX/XXI Co-Pa | y Assessment | | |
| PM 3.4.1 N-TXIX/XXI Co-pay Assessment | 3.4.1 II. Sliding Copayment Schedule Table | Updated table to reflect 2008 Federal Poverty Levels. | April 1, 2008 | | |
| ADHS/DBH | S PROVIDER MA | ANUAL FORM AE-01 AHCCCS Title XIX/ | XXI Eligibility | | |
| Screening | | | . | | |
| AE-01 AHCCCS TXIX/XXI Eligibility Screening | AE-01 Section D And F | Updated tables to reflect 2008 Federal Poverty Levels. | April 1, 2008 | | |